
Alaska Adult Education Professional Development Conference Summary

Return this form to AK Adult Education Office within 30 days after conference completion

Teacher's Name: _____
Adult Education Program: _____ Region: _____
Phone Number: _____ Email: _____
Conference Attended: _____

Please answer the following questions:

What subject area did you focus on? (Select all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Adult Education (reading, writing, mathematics, family literacy, digital literacy, etc.) | <input type="checkbox"/> Colleges and Universities |
| <input type="checkbox"/> Career Pathways | <input type="checkbox"/> Correctional Education |
| <input type="checkbox"/> Community Partnerships | <input type="checkbox"/> English Language Learners |
| <input type="checkbox"/> Distance Learning | <input type="checkbox"/> Military Education |
| <input type="checkbox"/> Learners with Disabilities and Special Needs | <input type="checkbox"/> Recruitment and Retention |
| <input type="checkbox"/> Policies | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Workforce Development | |

Summarize the conference attended and the knowledge gained.

Describe how the conference will impact student achievement.

State of Alaska Adult Education Program

Equal Opportunity Employer/Program Auxiliary aids and services are available upon request to individuals with disabilities
Attribution Statement: Project funded by grants awarded by the State of Alaska and US Department of Education

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Describe research-based strategies you learned and how you intend to implement these into your program.

What information can you share with other programs throughout the state?

Would you recommend this conference to colleagues? Why or why not?

Complete and submit the proposal form to one of the following:

1. Email: ged@alaska.gov
2. Fax: 907-465-4186
3. Mail:

Alaska Department of Labor and Workforce Development
AK Adult Education Office
PO Box 115509
Juneau, AK 99811-5509



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